MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

AFTER 1st AMENDMENT

DEP.

IND.

AS FILED IND.

OTAL

POTAL DEP.

DEP.

FILING DATE 09/926376

CLAIMS

AFTER 2nd AMENDMENT

DEP.

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

TOTAL DEP. TOTAL CLAIMS

ORM PTO-1380 (REV, 3-78)

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